



Preamble

The American Telemedicine Association (ATA), with more than 2,500 members, is the principal organization of telemedicine practitioners in the United States. The ATA is a nonprofit society that seeks to bring together diverse groups from traditional medicine, academic medical centers, technology and telecommunications companies, e-health, allied professional and nursing associations, medical societies, government and others to overcome barriers to the advancement of telemedicine through the professional, ethical and equitable improvement in health care delivery. The ATA has strong ties and strategic relationships with host organizations with other international Telemedicine Societies. The ATA will occasionally define new practice guidelines and technical standards for telehealth practice to help advance the science of telehealth and to improve the quality of service to patients. Existing practice guidelines and technical standards will be reviewed for revision or renewal periodically.

The guidelines and standards generated by ATA have undergone a thorough consensus and rigorous review, with final approval by the ATA Board of Directors. The practice guidelines and technical standards recognize that safe and effective telehealth practices require specific training, skills, and techniques, as described in each document. Reproduction or modification of the published practice guideline and technical standard by entities not providing these services is not authorized.

These standards are designed to serve as both a consensus operational best practice reference based on clinical empirical experience and an educational tool to aid practitioners in providing appropriate telehealth care for patients. The practice of medicine is an integration of both the science and art of preventing, diagnosing, and treating diseases. It should be recognized that compliance with these guidelines will not guarantee accurate diagnoses or successful outcomes. The purpose of these standards is to assist practitioners in pursuing a sound course of action to provide effective and safe medical care that is founded on current information, available resources, and patient needs.

The practitioner is responsible for the final decision about the appropriateness of a specific procedure or course of action, considering all presenting circumstances. An approach that differs from the guidelines does not necessarily imply that the approach was below the standard of care. If circumstances warrant, a practitioner may responsibly pursue a course of action different from the guidelines when, in the reasonable judgment of the practitioner, such action is indicated by the condition of the patient, restrictions or limits on available resources, or advances in information or technology subsequent to publication of the guidelines. Nonetheless, a practitioner who uses an approach that is significantly different from these guidelines is strongly advised to document in the patient record information adequate to explain the approach pursued.

Scope

These standards cover broad policies and procedures to be used by institutions providing remote medical services, interactive patient encounters, and any other electronic communications between patients and practitioners for the purposes of health care delivery. These standards apply to individual practitioners, group practices, health care systems, and other providers of health related services where there are TeleHealth interactions between patients and service providers for the purposes of health care delivery. These standards do not apply to specific clinical practices. Standards and guidelines addressing specific clinical areas will be developed by separate work groups within ATA and its collaborators.

Definitions

For the purposes of this document, the term “organization” includes organizations and health professionals who work in organizations. “Health professionals” refers to individuals. The key word “shall” is used to indicate a mandatory requirement, statement, or action.

Telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve, maintain, or assist patients' health status. Closely associated with telemedicine is the term "telehealth," which is often used to encompass a broader definition of remote health care that does not always involve clinical services. Videoconferencing, transmission of still images, e-health including patient portals, remote monitoring of vital signs, continuing medical education, and nursing call centers, are all considered part of telemedicine and telehealth (ATA, 2007).

Standards are defined as a statement established by consensus or authority, that provide a benchmark for measuring quality and that are aimed at achieving optimal results (NIFTE Research Consortium, 2003).

Administrative Standards

Organizations

- 1) Organizations providing services via telehealth shall follow the standard operating policies and procedures of the governing institution. If the telehealth operation is a sole entity or part of a solo practice, that entity or solo practice shall have policies and procedures in place to govern all administrative functions that responsibly include and address aspects of telehealth with regards to:
 - a. Human resource management
 - b. Privacy and confidentiality
 - c. Federal, state, and other credentialing and regulatory agency requirements
 - d. Fiscal management
 - e. Ownership of patient records
 - f. Documentation
 - g. Patient rights and responsibilities
 - h. Network security
 - i. TeleHealth equipment use
 - j. Research protocols
- 2) Organizations providing telehealth programs shall have in place a systematic quality improvement and performance management process that complies with any organizational, regulatory, or accrediting, requirements for outcomes management.
- 3) Organizations and health professionals providing telehealth services shall ensure compliance with relevant legislation, regulations, and accreditation requirements for supporting patient/client decision-making and consent, including protection of patient health information.
- 4) Organizations shall have a mechanism in place for assuring that patients are aware of their rights and responsibilities with respect to accessing health care via telehealth technologies, including the process for communicating complaints.
- 5) Organizations shall integrate telehealth into the existing operational procedures for obtaining consent for treatment from patients and organizations shall provide a mechanism for additional informed consent when required for invasive procedures.

- 6) Organizations providing telehealth services that establish collaborative partnerships shall be aware of applicable legal and regulatory requirements for appropriate written agreements, memorandum of understanding, or contracts. Those contracts, agreements, etc., shall be based on the scope and application of the telehealth services offered, and, shall address all applicable administrative, clinical, and technical requirements.

Health Professionals

- 1) Health professionals providing telehealth services shall be fully licensed and registered with their respective regulatory/licensing bodies and with respect to the site where the patient is located, administrative, legislative, and regulatory requirements.
- 2) Health professionals providing telehealth services shall be aware of credentialing requirements at the site where the consultant is located and the site where the patient is located, in compliance with and when required by regulatory and accrediting agencies.
- 3) Health professionals shall be aware of their locus of accountability and any/all requirements (including those for liability insurance) that apply when practicing telehealth in another jurisdiction.
- 4) Health professionals using telehealth shall be cognizant of when a provider-patient relationship has been established within the context of a telemedicine encounter between the health care provider and the patient, whether interactive or store-and-forward, and proceed accordingly with an evidence-based, best possible standard of care.
- 5) Health professionals providing telehealth services shall have the necessary education, training/orientation, and ongoing continuing education/professional development to ensure they possess the necessary competencies for the safe provision of quality health services in their specialty area.

Telemedicine Ethics

Although Telemedicine is not a practice in and of itself, practicing at a distance creates a unique relationship with the patient that requires attention to and adherence to professional ethical principles. An organization or health professional that adheres to ethical Telemedicine principles shall:

- 1) incorporate organizational values and ethics statements into the administrative policies and procedures for Telemedicine
- 2) be aware of medical and other professional discipline codes of ethics when using telemedicine;
- 3) inform the patient of their rights and responsibilities when receiving care at a distance (through telemedicine) including the right to refuse to use telemedicine;
- 4) provide patients and providers with a formal process for resolving ethical questions and issues that might arise as a result of a telemedicine encounter;
- 5) eliminate any conflict of interest to influence decisions made about, for, or with patients who receive care via telemedicine.

Clinical Standards

- 1) The organization and health professionals shall be satisfied that health professionals providing care via telehealth are aware of their own professional discipline standards and those standards shall be upheld in the telehealth encounter, considering the specific context, location and timing, and services delivered to the patient.
- 2) Health professionals shall be guided by professional discipline and national existing clinical practice guidelines when practicing via telehealth, and any modifications to specialty-specific clinical practice standards for the telehealth setting shall ensure that clinical requirements specific to the discipline are maintained.

Technical Standards

- 1) Organizations shall ensure that equipment sufficient to support diagnostic needs is available and functioning properly at the time of clinical encounters.
- 2) Organizations shall have strategies in place to address the environmental elements of care necessary for the safe use of telehealth equipment.
- 3) Organizations shall comply with all relevant safety laws, regulations, and codes for technology and technical safety.
- 4) Organizations shall have infection control policies and procedures in place for the use of telehealth equipment and patient peripherals that comply with organizational, legal, and regulatory requirements.
- 5) Organizations providing telehealth services shall have policies and procedures in place to comply with local legislated and regulatory rules for protection of patient health information and to ensure the physical security of telehealth equipment and the electronic security of data.
- 6) Organizations shall have appropriate redundant systems in place that ensure availability of the network for critical connectivity.
- 7) Organizations shall have appropriate redundant clinical video and exam equipment for critical clinical encounters and clinical functions.
- 8) Organizations shall meet required published technical standards for safety and efficacy for devices that interact with patients or are integral to the diagnostic capabilities of the practitioner when and where applicable.
- 9) Organizations providing telehealth services shall have processes in place to ensure the safety and effectiveness of equipment through on-going maintenance.

References

- 1) American Telemedicine Association. <http://atmeda.org/news/definition.html>. Last accessed August 7, 2007.
- 2) National Initiative for TeleHealth Guidelines: Environmental Scan of Organizational, Technology, Clinical and Human Resource Issues. RW Pong, JC Hogenbirk, K Byrne, L Liboiron-Grenier, P Jennett, M Yeo, J Finley, D Reid, C Szpilfogel, S Heath, P Brockway, T Craddock. April 30, 2003. www.liebertonline.com/doi/pdf/10.1089/153056204773644661 . Last accessed August 7, 2007.